

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

Page 1

NAME: COS SAMOA PACKING CO

ADDRESS: P.O. BOX 957
PAGO PAGO, AS 96799

FACILITY: COS SAMOA TUNA CANNERY

LOCATION: P.O. BOX 957
PAGO PAGO, AS 96799

ATTN:MR. HERMAN GEBAUER

AS0000027

PERMIT NUMBER

001A

DISCHARGE NUMBER

DMR MAILING ZIP CODE: 96799

MAJOR

DISCHARGE 001/MONTHLY

External Outfall

No Discharge ☐

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	08	04	01		08	04	30

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Temperature, water deg. fahrenheit	SAMPLE MEASUREMENT	*****	*****		*****						
00011 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		*****	90 MO AVG	95 DAILY MX	deg F		Continuous	CONTIN
BOD, 5-day, 20 deg. C	SAMPLE MEASUREMENT	*****	*****		*****						
00310 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Once Per Weekly Discharge	COMP24
pH	SAMPLE MEASUREMENT	*****	*****			*****					
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		6.5 MINIMUM	*****	8.6 MAXIMUM	SU		Continuous	CONTIN
Solids, total suspended	SAMPLE MEASUREMENT				*****	*****	*****				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	2970 MO AVG	7470 DAILY MX	lb/d	*****	*****	*****			Once Per Weekly Discharge	COMP24
Nitrogen, total (as N)	SAMPLE MEASUREMENT				*****	*****	*****				
00600 1 0 Effluent Gross	PERMIT REQUIREMENT	800 MO AVG	1934 DAILY MX	lb/d	*****	*****	*****			Twice Every Discharge Week	COMP24
Phosphorus, total (as P)	SAMPLE MEASUREMENT				*****	*****	*****				
00665 1 0 Effluent Gross	PERMIT REQUIREMENT	208 MO AVG	271 DAILY MX	lb/d	*****	*****	*****			Twice Every Discharge Week	COMP24
Oil and grease	SAMPLE MEASUREMENT				*****	*****	*****				
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	756 MO AVG	1890 DAILY MX	lb/d	*****	*****	*****			Once Per Weekly Discharge	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE		DATE		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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PAGO PAGO, AS 96799

ATTN:MR. HERMAN GEBAUER

AS0000027

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DISCHARGE NUMBER

DMR MAILING ZIP CODE: 96799

MAJOR

DISCHARGE 001/MONTHLY

External Outfall

No Discharge ☐

MONITORING PERIOD							
YEAR	MO	DAY		YEAR	MO	DAY	
08	04	01		08	04	30	

FROM

TO

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT				*****	*****	*****				
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	Mgal/d	*****	*****	*****			Continuous	METER
Ammonia (as N) + unionized ammonia	SAMPLE MEASUREMENT				*****						
61574 1 0 Effluent Gross	PERMIT REQUIREMENT	973.31 MO AVG	1952.93 DAILY MX	lb/d	*****	83.36 MO AVG	167.26 DAILY MX	mg/L		Once Per Weekly Discharge	COMP24

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FACILITY: COS SAMOA TUNA CANNERY
LOCATION: P.O. BOX 957
 PAGO PAGO, AS 96799

MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
08	05	01	FROM	08	05	31
			TO			

DISCHARGE 001/MONTHLY
 External Outfall

ATTN:MR. HERMAN GEBAUER

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Temperature, water deg. fahrenheit	SAMPLE MEASUREMENT	*****	*****		*****						
00011 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		*****	90 MO AVG	95 DAILY MX	deg F		Continuous	CONTIN
BOD, 5-day, 20 deg. C	SAMPLE MEASUREMENT	*****	*****		*****						
00310 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Once Per Weekly Discharge	COMP24
pH	SAMPLE MEASUREMENT	*****	*****			*****					
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		6.5 MINIMUM	*****	8.6 MAXIMUM	SU		Continuous	CONTIN
Solids, total suspended	SAMPLE MEASUREMENT				*****	*****	*****				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	2970 MO AVG	7470 DAILY MX	lb/d	*****	*****	*****			Once Per Weekly Discharge	COMP24
Nitrogen, total (as N)	SAMPLE MEASUREMENT				*****	*****	*****				
00600 1 0 Effluent Gross	PERMIT REQUIREMENT	800 MO AVG	1934 DAILY MX	lb/d	*****	*****	*****			Twice Every Discharge Week	COMP24
Phosphorus, total (as P)	SAMPLE MEASUREMENT				*****	*****	*****				
00665 1 0 Effluent Gross	PERMIT REQUIREMENT	208 MO AVG	271 DAILY MX	lb/d	*****	*****	*****			Twice Every Discharge Week	COMP24
Oil and grease	SAMPLE MEASUREMENT				*****	*****	*****				
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	756 MO AVG	1890 DAILY MX	lb/d	*****	*****	*****			Once Per Weekly Discharge	GRAB

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MAJOR

DISCHARGE 001/MONTHLY

External Outfall

No Discharge ☐

MONITORING PERIOD							
YEAR	MO	DAY		YEAR	MO	DAY	
08	05	01		08	05	31	

FROM

TO

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT				*****	*****	*****				
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Ammonia (as N) + unionized ammonia	SAMPLE MEASUREMENT				*****						
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MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
08	06	01	FROM	08	06	30

DISCHARGE 001/MONTHLY
External Outfall

ATTN:MR. HERMAN GEBAUER

No Discharge ☐

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MAJOR

DISCHARGE 001/MONTHLY

External Outfall

No Discharge ☐

MONITORING PERIOD							
YEAR	MO	DAY		YEAR	MO	DAY	
08	06	01		08	06	30	

FROM

TO

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DISCHARGE MONITORING REPORT (DMR) - Summary

Last Refresh: 7/16/2008

Report Selection Criteria:

Beginning Monitoring Period End Date: 04/2008

NPDES ID(s): AS0000027

Months to Print: 3 Months

Limit Set ID(s): *

Permitted Feature ID(s): *

Major/Minor Indicator(s): MAJOR

Print DMR Information: No

Sort Forms By: NPDES ID

State Code(s): AS

State-Region(s): *

Zip Code(s): *

Total Number of NPDES ID(s): 1

NPDES ID

AS0000027